PTO/SB/06 (08-03)

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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number Substitute for Form PTO-875 CLAIMS AS FILED - PART I OTHER THAN (Column 1) SMALL ENTITY OR (Column 2) SMALL ENTITY FOR NUMBER FILED NUMBER EXTRA RATE FEE BASIC FEE RATE FEE (37 CFR 1.16(a)) OR TOTAL CLAIMS (37 CFR 1.16(c)) minus 20 = X \$ OR INDEPENDENT CLAIMS (37 CFR 1.16(b)) minus 3 = OR MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR \* If the difference in column 1 is less than zero, enter \*0\* in column 2. **TOTAL** OR TOTAL CLAIMS AS AMENDED - PART II OTHER THAN (Column 1) (Column 2) (Column 3) OR SMALL ENTITY SMALL ENTITY CLAIMS HIGHEST REMAINING NUMBER RESENT RATE ADDI-RATE DDI-**AFTER** PREVIOUSLY **EXTRA** TIONAL IONAL AMENDMENT PAID FOR FEE ENDM Total Minus 22 (37 CFR 1.16(c)) X S OR Independent (37 CFR 1.16(b)) Minus X S X \$ OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1. (6(d)) OR + 5 TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST  $\omega$ REMAINING NUMBER PRESENT RATE ADDI-RATE ADDI-AFTER **PREVIOUSLY EXTRA** TIONAL AMENDMENT TIONAL ĺΩ PAID FOR FEE FEE ENDM Total Minus (37 CFR 1.16(c)) X \$ OR Independent (37 CFR 1.16(b)) Minus X S OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR = TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST 0 REMAINING NUMBER PRESENT RATE ADDI-ENT RATE ADDI-**AFTER** PREVIOUSLY **EXTRA** TIONAL AMENDMENT TIONAL PAID FOR FEE FEE MENDM Total (37 CFR 1.16(c)) Minus OR Independent (37 CFR 1.16(b)) Minus OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'I FEF • If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". ADD'L FEE The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

## Application or pocket Number PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003 **CLAIMS AS FILED - PART I** SMALL ENTITY **OTHER THAN** (Column 1) (Column 2) TYPE [ **SMALL ENTITY** OR **TOTAL CLAIMS** RATE FEE RATE FEE BASIC FEE FOR NUMBER EXTRA 375.00 BASIC FEE 750.00 NUMBER FILED OR TOTAL CHARGEABLE CLAIMS Ŋ minus 20= X\$ 9= X\$18= OR INDEPENDENT CLAIMS minus 3 = X42 =X84= OR MULTIPLE DEPENDENT CLAIM PRESENT +280= +140= \* If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL TOTAL **CLAIMS AS AMENDED - PART II OTHER THAN SMALL ENTITY SMALL ENTITY** OR (Column 3) (Column 1) (Column 2) HIGHEST CLAIMS ADDI-ADDI-REMAINING NUMBER PRESENT TIONAL RATE TIONAL RATE AMENDMENT **PREVIOUSLY AFTER EXTRA FEE** FEE **AMENDMENT** PAID FOR Total Minus X\$ 9= X\$18= OR Ind pendent Minus \*\*\* X42= X84= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +280= +140= OR TOTAL OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-ADDI-8 REMAINING NUMBER PRESENT TIONAL TIONAL RATE RATE **PREVIOUSLY** AMENDMENT **AFTER** EXTRA **AMENDMENT** PAID FOR FEE FEE Minus **Total** X\$18= X\$ 9= OR Ind pendent Minus \*\*\* X42= X84= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140= +280= OR TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 3) (Column 1) (Column 2) CLAIMS HIGHEST ADDI-ADDI-REMAINING NUMBER PRESENT TIONAL **AMENDMENT** RATE RATE TIONAL **AFTER PREVIOUSLY EXTRA** AMENDMENT PAID FOR FEE FEE Total Minus \*\* X\$18= X\$ 9= OR Independent Minus X42= X84= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140= +280= OR \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." TOTAL TOTAL OR ADDIT, FEE ADDIT. FEE \*\*\*If the "Highest Number Previously Pald For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.